

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 OCT 28	AM	8:	13
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N N	(Instructions on ou	of or application,	SECO NOT
1.	The name of the limited liability of	company is:	SECE BY OF STATE STATE OF IDAHO
	, and the state of	DBD, LLC	- OF IDAHO
2.	The complete street and mailing a 2230 E. 25th Street	addresses of the initia	I designated/principal office:
	(Street Address) Idaho Falls, ID 83404 (Mailing Address, if different than street address	3)	
3.	The name and complete street ac		ed agent:
	David G. Collette		Idaho Falls, ID 83404
	(Name)	(Street Address)	
4.	The name and address of at least company: Name David G. Collette	5635 S. 9th E. Idah	Address:
5	Mailing address for future corres	pondence (annual rep	ort notices):
J .	2230 E. 25th Street, Idaho Falls, ID 83		•
6.	Future effective date of filing (op	tional): <u>10/25/10</u>	
•	gnature of a manager, member	or authorized	
Sig	gnature <u>Laud Collette</u> ped Name: <u>David G. Collette</u>		Secretary of State use only
Sig	gnature		IDAHO SECRETARY OF STATE 10/28/2010 05:00
•	ped Name:		CK: 9633 CT: 252375 BH: 1245007 1 8 100,80 = 100.00 ORGAN LLC # 2

cert_org_lic Rev. 07/2010